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| | Document | rayer | 01.5 | | |
|---|--|-----------------|-----------------------------------|--|-------------------|
| Fill in this information to identify | your case: | | | | |
| Debtor 1 Rashonda M | /IcClellan | | | | |
| First Name | | Last Name | | | |
| Debtor 2 | Middle Nesse | Loot Nome | | | |
| (Spouse if, filing) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for | the: NORTHERN DISTRICT OF ILLIN | 10IS | | | |
| Case number 23-11197 | | | | | |
| (if known) | | | | ■ Check | if this is an |
| | | | | | led filing |
| | | | | | - |
| Official Form 106D | | | | | |
| Schedule D: Credito | ors Who Have Claims S | ecured | by Propert | y | 12/15 |
| | ible. If two married people are filing together, | | | | |
| number (if known). | | | | | |
| Do any creditors have claims secure | ed by your property? | | | | |
| ☐ No. Check this box and sub | mit this form to the court with your other so | chedules. You | u have nothing else t | o report on this form. | |
| Yes. Fill in all of the information | tion below. | | | | |
| Part 1: List All Secured Claims | s | | | | |
| | has more than one secured claim, list the credit | | Column A | Column B | Column C |
| | or has a particular claim, list the other creditors in abetical order according to the creditor's name. | n Part 2. As | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| | ű | | value of collateral. | claim | if any |
| 2.1 AmeriHome mortgage Creditor's Name | Describe the property that secures the | | \$87,346.00 | \$150,000.00 | \$0.00 |
| Creditor's Name | 10112 S. LaSalle St. Chicago, 60628 Cook County | IL | | | |
| PO Box 77404 | As of the date you file, the claim is: Ch | neck all that | | | |
| Trenton, NJ 08628 | apply. ☐ Contingent | | | | |
| Number, Street, City, State & Zip Code | | | | | |
| | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mo car loan) | ortgage or secu | red | | |
| Debtor 2 only | , — | | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mecha | anic's lien) | | | |
| ☐ At least one of the debtors and anoth☐ Check if this claim relates to a | 5 | /lortgage | | | |
| community debt | Other (including a right to offset) | | | | |
| Date debt was incurred | Last 4 digits of account number | r | | | |
| | | | | | |
| 2.2 Chrysler Capital | Describe the property that secures the | e claim: | \$40,000.00 | \$28,625.00 | \$11,375.00 |
| Creditor's Name | 2021 Dodge Ram | | | | |
| | | | | | |
| PO Box 961276 | As of the date you file, the claim is: Ch | eck all that | | | |
| Fort Worth, TX 76161 | apply. ☐ Contingent | | | | |
| Number, Street, City, State & Zip Code | <u> </u> | | | | |
| | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | ☐ An agreement you made (such as mo car loan) | ortgage or secu | red | | |
| Debtor 2 only | | | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anoth | ☐ Statutory lien (such as tax lien, mechanner ☐ Judgment lien from a lawsuit | anic's lien) | | | |
| ☐ At least one of the debtors and anoth | | Automobile | PMSI | | |
| C.look ii dilo claim relates to a | Other (including a right to offset) | | - | | |

community debt

Date debt was incurred

Last 4 digits of account number

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| Debtor 1 Rashonda McClellan | | Case number (if known) | 23-11197 | |
|---|---|------------------------|--------------|--------|
| First Name Middle | Name Last Name | | | |
| 2.3 City of Chicago Department of Water | Describe the property that secures the claim | n: \$6,000.00 | \$150,000.00 | \$0.00 |
| Creditor's Name | 10112 S. LaSalle St. Chicago, IL | | | |
| Utility Billing & Customer Service | 60628 Cook County | | | |
| 121 N. LaSalle St., Suite | As of the date you file, the claim is: Check all apply. | that | | |
| 400 | Contingent | | | |
| Chicago, IL 60602 | - | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage | e or secured | | |
| Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's | lien) | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Water | Bill | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| 2.4 Cook County Treasurer | Describe the property that secures the claim | n: \$1,297.33 | \$15,000.00 | \$0.00 |
| Creditor's Name | 1909 W 115th St. Chicago, IL | | | |
| | 60643-4848 Cook County | | | |
| | Pin #25-19-401-005-0000 - Debtor | | | |
| | has not paid the 2019, 2020, 2021, | or | | |
| | 2022 Cook County Real Estate Taxes | | | |
| 118 N. Clark, Room 112 | As of the date you file, the claim is: Check all | that | | |
| Chicago, IL 60602 | apply. | | | |
| Number, Street, City, State & Zip Code | Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| _ | _ | d | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | ☐ An agreement you made (such as mortgage car loan) | e or secured | | |
| Debtor 1 and Debtor 2 only | , | | | |
| _ | Statutory lien (such as tax lien, mechanic's | lien) | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Real I | Estate Taxes | | |
| 2019, 2020, 2021, and | | | | |
| Date debt was incurred 2022 | Last 4 digits of account number 0 | 0000 | | |

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| Debtor 1 Rashonda McClellan | | Case number (if known) | 23-11197 | |
|---|--|------------------------|--------------|---|
| First Name Middle N | lame Last Name | | | |
| 2.5 Fleet Equipment, LLC | Describe the property that secures the claim: | \$30,000.00 | \$22,500.00 | \$7,500.00 |
| Creditor's Name | 2016 International Pro Star | | , , , | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | | | | |
| | As of the date was file the plains in all the | | | |
| 2505 Farrisview Blvd. | As of the date you file, the claim is: Check all that apply. | | | |
| Memphis, TN 38118 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or s | ecured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Automob | ile PMSI | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Mercedes-Benz Financial | | | | |
| Services US | Describe the property that secures the claim: | \$56,813.62 | \$48,000.00 | \$8,813.62 |
| Creditor's Name | 2019 Mercedes GLS450 41000 miles | | | |
| | | | | |
| | As of the date you file, the claim is: Check all that | | | |
| PO Box 131265 | apply. | | | |
| Roseville, MN 55113-0011 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| | Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or s | ecured | | |
| ☐ Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Automob | ile PMSI | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |
| 2.7 Mr. Cooper | Describe the property that secures the claim: | \$392,798.00 | \$600,000.00 | \$0.00 |
| Creditor's Name | 307 Salisbury Dr. Munster, IN 46321 Lake County | | | |
| | As of the date you file, the claim is: Check all that | | | |
| PO Box 612488 | apply. | | | |
| Dallas, TX 75261-2488 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or s | ecured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Mortgage | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$614,254.95

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| Debtor 1 | Rashonda McClellan | | | Case number (if known) | 23-11197 | |
|-----------------------|--|-----------------------------|-------------------------------------|---------------------------------------|---|--|
| | First Name | Middle Name | Last Name | | | |
| | is the last page of y hat number here: | our form, add the dollar va | ilue totals from all pages. | \$614,254 | .95 | |
| Part 2: | List Others to E | Be Notified for a Debt Th | at You Already Listed | | | |
| trying to than one | collect from you for creditor for any of | or a debt you owe to someo | one else, list the creditor in Part | t 1, and then list the collection age | For example, if a collection agency is ency here. Similarly, if you have more tional persons to be notified for any | |
| | Name, Number, Stre Mercedes Fina | eet, City, State & Zip Code | | On which line in Part 1 did you ent | er the creditor? 2.6 | |
| | PO BOX 685 Roanoke, TX 7 | 6262 | | Last 4 digits of account number | _ | |

| Fill in this info | ormation to identify your | case: | | |
|---------------------------|---------------------------|-------------------|-------------|--|
| Debtor 1 | Rashonda McClellan | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Lasi Name | |
| United States 8 | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | 23-11197 | | | |
| | | | | |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is | NOT an attorney to help you fill out bankruptcy forms? |
| ■ No | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| that they are true and correct. | read the summary and schedules filed with this declaration and |
| X Isl Rashonda McClellan Rashonda McClellan Signature of Debtor 1 | Signature of Debloriz |
| Date December 8 2023 | Date |